Submit scholarship request accompanying a complete FOLD application

FOLD Program Scholarship Application

Name last/first/middle initial
Position/Title/Series/Grade/Rank
Business Address
Business Phone and Email
Scholarship request: [] FULL [] PARTIAL Amount Required
We strongly recommend agencies sponsor at a minimum, a portion of the tuition expense as a commitment to the program and to the employee's development.
Statement of Budgetary Funding:
Agency Financial Representative's printed name, phone number and date
Agency Financial Representative's signature

If Agency Financial Representative is not available to complete above, a statement regarding state of funding on letterhead or policy letter will suffice.